



SENIOR & LONG TERM CARE DIVISION COMMUNITY SERVICES BUREAU

COMMUNITY FIRST CHOICE Policy Manual

Section: SERVICE REQUIREMENTS

Subject: 180-Day and Annual Recertification

Reference: ARM 37.40.1005 and 37.40.1114

PURPOSE

This policy outlines the provider agency's responsibility to complete a mandatory in-person visit every six months after the initial intake visit. The provider agency Nurse Supervisor must complete the visit with every Agency Based (AB) Community First Choice/Personal Assistance Services (CFC/PAS) member to continue providing and billing CFC/PAS services.

The recertification visit is intended to ensure that the member is receiving appropriate services within the parameters of the AB-CFC/PAS program. Once a year the recertification visit is conducted in coordination with the annual Person Centered Planning (PCP) meeting to ensure that services are delivered according to member's choice and preferences.

RECERTIFICATION VISIT

1. The provider agency Nurse Supervisor is required to conduct a recertification visit every six months with the member. This visit is referred to as the recertification visit. There are two types of recertification visits:
 - a. 180-day recertification visit; and,
 - b. Annual recertification visits
2. The 180-day recertification visit must be completed in person in the member's home and the Nurse Supervisor must complete the Recertification form (SLTC-210).
 - a. The 180-day recertification visit does not require the Plan Facilitator to be present and it does not require the completion of a new PCP form (SLTC-200) or new Service Plan (SLTC-170). However, the visit should include a review of both of these forms for continued relevance and accuracy.
 - b. The first 180-day recertification visit must be completed by the end of the sixth month from the month the intake visit occurred and must occur in the member's home. For example, if the initial intake

		AB-CFC/PAS 703
Section: Service Requirements	Subject: 180-Day and Annual Recertification	

occurs in December, the first 180-day visit must occur by the end of June.

- i. The only exception is when the member transitions to case management within the first six months of service. When this occurs there is a change in the member's Plan Facilitator, which prompts a new PCP form to be completed. In this case, the provider agency may opt to conduct the member's annual at the time of the member's intake to HCBS waiver. All of the required annual recertification documentation must be completed to qualify the visit as an annual.
- c. All 180-day recertification visits, aside from the first one, must occur by the end of the sixth month from the annual recertification visit/coordinated PCP meeting and must be done in-person in the member's home. For example, if the annual occurs in June the next 180-day recertification visit must occur by the end of December.
 - i. The only exception is when the member transitions to case management between the annual and recertification visit. When this occurs there is a change in the member's Plan Facilitator, which prompts a new PCP form to be completed. In this case the provider agency may opt to conduct the member's annual at the time of the member's intake to HCBS waiver. All of the required annual recertification documentation must be completed to qualify the visit as an annual.
- 3. The annual recertification visit requires that the Nurse Supervisor complete a new Recertification form and develop a new Service Plan (STLC-170). In addition, the annual recertification visit includes coordination with the Plan Facilitator who must coordinate the annual person-centered planning meeting and complete the annual PCP form. The annual recertification visit must occur by the end of the sixth month from the 180-day recertification visit. For example, if the 180-day recertification visit is in December, the annual must be done by the end of June.
 - a. The annual recertification visit may be completed at a site other than the member's home. If it is a coordinated person centered planning meeting with the member and their Case Manager Plan Facilitator, the member and Plan Facilitator may determine another site is a more appropriate setting for the meeting.

		AB-CFC/PAS 703
Section: Service Requirements	Subject: 180-Day and Annual Recertification	

4. When necessary, 180-day and annual recertification visits may occur in a month prior to the month it is due. When this occurs all of the necessary components of the recertification visit must be completed for it to meet the mandatory visit requirements.

Note: When a member's Plan Facilitator is a case manager, the annual recertification schedule is based on the Case Manager Plan Facilitator's annual visit cycle. If a provider agency completes a 180-day recertification visit in a month prior to the six month and the Case Manager Plan Facilitators annual will not occur within six months of that visit, the provider agency must complete a second 180-day recertification visit prior to the member's annual recertification visit.

For example: if the member's 180-day recertification visit is scheduled for June, and the annual coordinated recertification/PCP meeting is scheduled in December, and the provider agency chooses to complete the 180-day recertification visit in May, the provider agency will be required to complete a second 180-day recertification visit by the end of November and also attend the annual recertification visit/coordinated PCP meeting in December.

5. Prior to completing the recertification visit, the provider agency should review the member's service delivery records, Service Plan, PCP form, member progress notes, Serious Occurrence Reports, and the member's Overview (SLTC-154) and Service Profile (SLTC-155) to determine whether services have been delivered according to the Service Plan. The provider agency should address any issues affecting service delivery and health and safety at the recertification visit. In addition, the following components should be completed on the Recertification form (SLTC-210):
 - a. Service utilization should be reflected; and,
 - b. Issues identified during a review of the member's file and service delivery records should be documented on the Recertification form and addressed during the 180-day recertification visit.
6. During the recertification visit, the Nurse Supervisor must review the following with the member:
 - a. Current care needs;
 - b. Service Plan Schedule;
 - c. Service Delivery Records;

		AB-CFC/PAS 703
Section: Service Requirements	Subject: 180-Day and Annual Recertification	

- d. Member's participation in program;
 - e. Member, worker, or provider concerns;
 - f. Evaluate the member's perception of the quality of services provided by the personal care attendant (PCA);
 - g. Review the member's need for continued services;
 - h. Document the member's evaluation of attendants;
 - i. Address with the member any issues identified during the review of the SDRs including patterns of:
 - i. Refused services and over-utilization or underutilization,
 - ii. identical service delivery records that may indicate SDR is being completed according to the sample SDR rather than capturing the actual service being delivered in the home, or
 - iii. principals of charting, and,
 - j. Document the provider agency's plan for addressing identified attendant issues.
7. The Nurse Supervisor must complete a new Recertification form at every recertification visit. The form must be signed by the Nurse Supervisor and member.
- a. If an issue is identified that needs to be addressed, the Nurse Supervisor should document the issue on the Recertification form, along with an action plan to address the issue.
 - b. Upon completion of the onsite recertification visit, the Nurse Supervisor is responsible to track and follow-up on any action items that were identified during the visit. The agency should document follow-up activity in the member's chart notes.
8. The Nurse Supervisor must complete a new Service Plan at every annual recertification visit. The new Service Plan should include a Service Plan Schedule that incorporates the member preferences as identified on the

		AB-CFC/PAS 703
Section: Service Requirements	Subject: 180-Day and Annual Recertification	

PCP form.

- a. The Nurse Supervisor does not have to complete a new Service Plan at the 180-day recertification visit. If a change is identified during the 180-day recertification visit on the member's Service Plan schedule, the Nurse Supervisor must take appropriate action; which may include implementing a temporary authorization or amendment.

SERVICE AUTHORIZATION

In order to bill for AB-CFC/PAS services a provider agency must have a current Recertification form and Service Plan in the member's chart. If either form is not current, a repayment for services rendered after the form expired will be due.

Note: A recertification form expires at the end of the sixth month following the month of the last recertification visit. The Service Plan expires at the end of the twelfth month from the month of the last annual visit.